

1 **SECTION 4.** Section 15 of chapter 12 of the General Laws, as appearing in the 2020
2 Official Edition, is hereby amended by striking out, in line 4, the figure “\$191,000” and inserting
3 in place thereof the following figure:- \$195,000.

4 **SECTION 5.** Section 18A of chapter 15 of the General Laws, as so appearing, is hereby
5 amended by adding the following paragraph:-

6 The board of higher education may establish administer and operate plans in accordance
7 with section 403(b) of the Internal Revenue Code of 1986, as amended. Such plans shall be
8 maintained for the exclusive benefit of plan participants and their beneficiaries. Eligible
9 employees, as determined by each plan, may include employees of the executive office of
10 education, the department of higher education, the department of elementary and secondary
11 education, the department of early education and care, the state universities, the state community
12 colleges and any other department identified by the secretary of education that meets the
13 requirements of an eligible employer under said section 403(b). The sole source of contributions
14 to the plans shall be employees’ elective contributions. Where applicable and appropriate, the
15 commonwealth shall remit such contributions to the provider selected by the participant from
16 those providers identified by the board of higher education as plan providers. Plan providers
17 identified by the board of higher education may offer annuity or custodial accounts meeting the
18 requirements of said section 403(b). Investments of plan contributions shall be directed by the
19 participant. The board of higher education may promulgate regulations governing the
20 administration of and participation in the plans.

21 **SECTION 6.** Chapter 15A of the General Laws is hereby amended by striking out
22 section 19D, as so appearing, and inserting in place thereof the following section:-

23 Section 19D. There shall be a scholarship program to be administered by the board which
24 shall be known as the tomorrow’s educators program to encourage students to teach in public
25 schools by providing qualified students with scholarships for tuition, fees and additional costs of
26 attendance as calculated by the student’s institution of higher education, including, but not
27 limited to, room and board, books and supplies, transportation, child care and personal expenses,
28 for a bachelor’s degree program or post-baccalaureate coursework at a public institution of
29 higher education in the commonwealth leading to the certification required for employment at a
30 public school. The program shall be subject to appropriation.

31 The board shall promulgate guidelines governing the tomorrow’s educators program
32 which shall include the following:

33 (1) Eligibility for the program shall be limited to high school graduates, undergraduate
34 students and students enrolled in post-baccalaureate educator preparation programs who: (i)
35 agree to complete a bachelor’s degree or post-baccalaureate educator preparation program in a
36 public institution of higher education in the commonwealth; (ii) successfully complete a
37 bachelor’s degree or post-baccalaureate educator preparation program at the institution of higher

38 education and obtain the appropriate certification in accordance with section 38G of chapter 71;
39 and (iii) commit to teaching for 4 years in a school district, as defined in section 2 of chapter 70,
40 in the commonwealth.

41 (2) An outreach plan to attract individuals from underrepresented populations to the
42 education profession through the program, which shall diversify the educator workforce
43 consistent with chapter 132 of the acts of 2019.

44 (3) Procedures for repayment of the amount of scholarship benefits for persons who
45 participate in the program but who fail to complete the 4-year teaching commitment; provided,
46 that said procedures shall be designed to ensure there are no disincentives for low-income
47 students to participate in the program and shall consider: (i) the amount of scholarship benefits
48 the participant has received; (ii) the participant's current income if not working as a public
49 school educator; (iii) whether the participant is currently working in another position that helps
50 to support or educate students; and (iv) the amount of time the participant taught in a public
51 school district in the commonwealth.

52 **SECTION 7.** Section 26 of said chapter 15A, as so appearing, is hereby amended by
53 adding the following sentence:- This section shall not apply to the community college segment,
54 as defined in section 5.

55 **SECTION 8.** Section 10H of chapter 21A of the General Laws, as so appearing, is
56 hereby amended by inserting, after the word "inclusive," in line 20, the following words:- or
57 section 27.

58 **SECTION 9.** Subsection (a) of section 14 of chapter 25A of the General Laws, as so
59 appearing, is hereby amended by striking out, in line 3, the figure "\$100,000" and inserting in
60 place thereof the following figure:- \$300,000.

61 **SECTION 10.** Said section 14 of said chapter 25A, as so appearing, is hereby further
62 amended by adding the following subsection:-

63 (e) For the purposes of this section, the term "energy conservation projects" shall mean
64 projects to promote energy conservation, including, but not limited to, energy conserving
65 modification to windows and doors; caulking and weatherstripping; insulation; automatic energy
66 control systems; hot water systems; equipment required to operate variable steam, hydraulic and
67 ventilating systems; plant and distribution system modifications, including replacement of
68 burners, furnaces or boilers; devices for modifying fuel openings; electrical or mechanical
69 furnace ignition systems; utility plant system conversions; replacement or modification of
70 lighting fixtures; energy recovery systems; on-site electrical generation equipment using new
71 renewable energy generating sources as defined in section 11F; climate resilience and
72 decarbonization activities; and cogeneration systems.

73 **SECTION 11.** Section 2SSSS of chapter 29 of the General Laws, as so appearing, is
74 hereby amended by inserting after the word "Fund", in line 35, the following words:- and shall
75 be available for expenditure in subsequent fiscal years.

76 **SECTION 12.** Subsection (a) of section 2WWWW of said chapter 29, as so appearing, is
77 hereby amended by striking out the second sentence and inserting in place thereof the following
78 sentence:- There shall be credited to the fund: (i) any transfers from the Health Safety Net Trust
79 Fund established in section 66 of chapter 118E; (ii) an amount equal to any federal financial
80 participation revenues claimed and received by the commonwealth for eligible expenditures
81 made from the fund; (iii) any revenue from appropriations or other money authorized by the
82 general court and specifically designated to be credited to the fund; and (iv) interest earned on
83 any money in the fund.

84 **SECTION 13.** Section 2YYYY of said chapter 29, as amended by section 16 of chapter
85 24 of the acts of 2021, is hereby further amended by striking out the second paragraph and
86 inserting in place thereof the following paragraph:-

87 The secretary may expend, without further appropriation: (i) not more than \$105,000,000
88 per fiscal year from the fund to expand and support the residential treatment system to treat
89 individuals with a substance use disorder or co-occurring mental health and substance use
90 disorder and to expand and increase access to the 24-hour diversionary system; (ii) not more than
91 \$135,000,000 per fiscal year from the fund to reduce stigma, expand access, support
92 implementation and increase competencies for medications for substance use disorder; (iii) not
93 more than \$35,000,000 per fiscal year from the fund to support access to evidence-based
94 recovery services through peer and paraprofessional services; and (iv) not more than
95 \$80,000,000 per fiscal year from the fund to ensure appropriate assessment for levels of care
96 utilizing American Society of Addiction Medicine or other evidence-based modalities and to
97 support integration of physical health, mental health and substance use disorder care across all
98 provider settings. To accommodate timing discrepancies between the receipt of revenues and
99 related expenditures, the fund may incur expenses, and the comptroller shall certify for payment,
100 amounts not to exceed the most recent revenue estimate as certified by the MassHealth director,
101 as reported in the state accounting system. Amounts credited to the fund shall not be subject to
102 further appropriation and money remaining in the fund at the end of a fiscal year shall not revert
103 to the General Fund and shall be available for expenditure in the subsequent fiscal year.

104 **SECTION 14.** The third paragraph of said section 2YYYY of said chapter 29, as
105 appearing in the 2020 Official Edition, is hereby amended by adding the following sentence:-
106 The secretary shall report quarterly to the house and senate committees on ways and means and
107 the joint committee on mental health, substance use and recovery on expenditures from the fund
108 that support the components of the roadmap for behavioral health reform; provided, that said
109 report shall include: (i) information on which components of the roadmap such funds are
110 allocated to support; and (ii) provide a breakdown of the progress and status of any such
111 components of the roadmap.

112 **SECTION 15.** Section 2AAAAA of said chapter 29, as so appearing, is hereby amended
113 by striking out the second paragraph and inserting in place thereof the following paragraph:-

114 There shall be credited to the fund: (i) any transfers from the Health Safety Net Trust
115 Fund established in section 66 of chapter 118E; (ii) any revenue from appropriations or other

116 money authorized by the general court and specifically designated to be credited to the fund; (iii)
117 an amount equal to any federal financial participation revenues claimed and received by the
118 commonwealth for eligible expenditures made from the fund; and (iv) interest earned on any
119 money in the fund. Money from the fund shall be expended for payments to providers that
120 qualify under an approved federal waiver and in accordance with said waiver. Amounts credited
121 to the fund shall not be subject to further appropriation. After the end of each fiscal year, the
122 secretary of health and human services shall determine, in the secretary's sole discretion, the
123 amount of any monies in the fund that are in excess of the monies needed to make payments
124 from the fund in accordance with said waiver; provided, that the monies needed to make such
125 payments shall include any monies needed to make any payments that are unearned as of the end
126 of such year, but potentially earned in a subsequent year. Subject to the terms of said waiver, the
127 secretary of health and human services shall transfer to the Health Safety Net Trust Fund
128 established in section 66 of chapter 118E the state share of any such excess monies, multiplied
129 by a fraction, the numerator of which is \$62,500,000 and the denominator of which is the total
130 amount transferred to or deposited in the fund for such fund year, excluding any federal funds.
131 Money remaining in the fund at the end of a fiscal year shall not revert to the General Fund and
132 shall be available for expenditure in subsequent fiscal years. To accommodate timing
133 discrepancies between the receipt of revenue and related expenditures, the comptroller may
134 certify for payment amounts not to exceed the most recent revenue estimates as certified by the
135 secretary of health and human services to be transferred, credited or deposited under this section.

136 **SECTION 16.** Said section 2AAAAA of said chapter 29, as so appearing, is hereby
137 further amended by striking out the second paragraph and inserting in place thereof the following
138 paragraph:-

139 There shall be credited to the fund: (i) any transfers from the Health Safety Net Trust
140 Fund established in section 66 of chapter 118E; (ii) any revenue from appropriations or other
141 money authorized by the general court and specifically designated to be credited to the fund; (iii)
142 an amount equal to any federal financial participation revenues claimed and received by the
143 commonwealth for eligible expenditures made from the fund; and (iv) interest earned on any
144 money in the fund. Money from the fund shall be expended for payments to providers that
145 qualify under an approved federal waiver and in accordance with said waiver. Amounts credited
146 to the fund shall not be subject to further appropriation. Money remaining in the fund at the end
147 of a fiscal year shall not revert to the General Fund and shall be available for expenditure in
148 subsequent fiscal years. To accommodate timing discrepancies between the receipt of revenue
149 and related expenditures, the comptroller may certify for payment amounts not to exceed the
150 most recent revenue estimates as certified by the secretary of health and human services to be
151 transferred, credited, or deposited under this section.

152 **SECTION 17.** Said chapter 29 is hereby further amended by inserting after section
153 2SSSSS, inserted by section 6 of chapter 42 of the acts of 2022, the following 3 sections:-

154 Section 2TTTTT. (a) There shall be a Hospital Investment and Performance Trust Fund.
155 The secretary of health and human services shall be the trustee of the fund and shall expend
156 money in the fund to make payments to acute hospitals or to care organizations under contract
157 with the executive office of health and human services to provide MassHealth services pursuant

158 to an approved state plan or federal waiver; provided, that such care organizations shall use all
159 such payments to make payments to qualifying acute hospitals. There shall be credited to the
160 fund: (i) any transfers from the Health Safety Net Trust Fund established in section 66 of chapter
161 118E; (ii) an amount equal to any federal financial participation revenues claimed and received
162 by the commonwealth for eligible expenditures made from the fund; (iii) any revenue from
163 appropriations or other money authorized by the general court and specifically designated to be
164 credited to the fund; and (iv) interest earned on any money in the fund. Amounts credited to the
165 fund shall be expended without further appropriation.

166 (b) Money in the fund shall be expended for Medicaid payments under an approved state
167 plan or federal waiver; provided, however, that all payments from the fund shall be: (i) subject to
168 the availability of federal financial participation; (ii) made only under federally-approved
169 payment methods; (iii) consistent with federal funding requirements and all applicable federal
170 payment limits as determined by the secretary; and (iv) subject to the terms and conditions of
171 applicable agreements between acute hospitals or care organizations and the executive office of
172 health and human services. To accommodate timing discrepancies between the receipt of
173 revenue and related expenditures, the comptroller may certify for payment amounts not to exceed
174 the most recent revenue estimates as certified by the secretary to be transferred, credited or
175 deposited under this section. The secretary shall to the maximum extent possible, and in
176 compliance with all laws and regulations, administer the fund to obtain federal financial
177 participation for the expenditures of non-federal monies from the fund. Money remaining in the
178 fund at the end of a fiscal year shall not revert to the General Fund and shall be available for
179 expenditure in subsequent fiscal years. The payments from the fund shall supplement and not
180 supplant Medicaid payments that would be made to providers in the absence of such payments.

181 (c)(1) The secretary shall expend money in the fund, including all amounts credited to the
182 fund, for payments to qualifying acute hospital providers under contract with the executive office
183 of health and human services or under subcontracts with care organizations that contract with the
184 executive office in connection with the MassHealth program, as further provided in paragraph
185 (2).

186 (2) The secretary shall annually expend amounts from the fund averaging, over a period
187 of 5 years, not less than \$1,210,000,000 per year; provided, that all such payments shall fall into
188 1 of the following 4 categories: (i) health equity incentive payments; (ii) clinical quality
189 incentive payments; (iii) rate payments for services provided to MassHealth members; or (iv)
190 targeted payments to (A) freestanding pediatric acute hospitals; and (B) non-profit teaching acute
191 hospitals that provide medical, surgery, emergency and obstetrical services and are affiliated
192 with a state-owned medical school. The secretary may determine funding allocations among and
193 within each such category within a given year; provided, that such allocations shall be consistent
194 with all approved federal waivers and state plan provisions; and provided further, that the
195 secretary shall allocate an average of not less than \$560,000,000 per year, over a period of 5
196 years, for the rate payments described in clause (iii).

197 (3) Of the targeted payments described in clause (iv) of paragraph (2), the secretary shall
198 expend annually from the fund: (i) \$25,000,000 to freestanding pediatric acute hospitals, of
199 which 90 per cent shall be paid to the freestanding pediatric hospital with the largest volume of

200 inpatient discharges in fiscal year 2019; and (ii) \$25,000,000 to non-profit teaching acute
201 hospitals that provide medical, surgery, emergency and obstetrical services and are affiliated
202 with a state-owned medical school.

203 (4) Of the health equity incentive payments and clinical quality incentive payments
204 described in clauses (i) and (ii) of paragraph (2), the secretary shall make interim payments to
205 qualifying hospitals based on the secretary's estimate of each such hospital's final payment for
206 the measurement period, with each such estimate as determined by the secretary, in the
207 secretary's sole discretion. As soon as practicable after the close of the measurement period, the
208 secretary shall determine, in the secretary's sole discretion, the final amount of each qualifying
209 hospital's health equity incentive payment and clinical quality incentive payment and shall
210 reconcile each hospital's interim payment with its final payment.

211 (d) In the event that any portion of the final annual amount allocated by the secretary to
212 health equity incentive payments or clinical quality incentive payments is unearned during the
213 relevant measurement period for such payment, as determined by the secretary, in the secretary's
214 sole discretion, the secretary shall transfer the state share of that unearned amount to the Health
215 Safety Net Trust Fund established in section 66 of chapter 118E.

216 Section 2UUUUU. (a) There shall be a Population Health Investment Trust Fund. The
217 secretary of health and human services shall be the trustee of the fund and shall expend money in
218 the fund to make payments to providers or care organizations under contract to provide
219 MassHealth services pursuant to an approved state plan or federal waiver. There shall be credited
220 to the fund: (i) any transfers from the Health Safety Net Trust Fund established in section 66 of
221 chapter 118E; (ii) an amount equal to any federal financial participation revenues claimed and
222 received by the commonwealth for eligible expenditures made from the fund; (iii) any revenue
223 from appropriations or other money authorized by the general court and specifically designated
224 to be credited to the fund; and (iv) interest earned on any money in the fund. Amounts credited to
225 the fund shall be expended without further appropriation.

226 (b) Money in the fund may be expended for Medicaid payments under an approved state
227 plan or federal waiver; provided, however, that all payments from the fund shall be: (i) subject to
228 the availability of federal financial participation; (ii) made only under federally-approved
229 payment methods; (iii) consistent with federal funding requirements and all applicable federal
230 payment limits as determined by the secretary; and (iv) subject to the terms and conditions of
231 applicable agreements between providers or care organizations and the executive office of health
232 and human services. To accommodate timing discrepancies between the receipt of revenue and
233 related expenditures, the comptroller may certify for payment amounts not to exceed the most
234 recent revenue estimates as certified by the secretary to be transferred, credited or deposited
235 under this section. The secretary shall to the maximum extent possible, and in compliance with
236 all laws and regulations, administer the fund to obtain federal financial participation for the
237 expenditures of non-federal monies from the fund. Money remaining in the fund at the end of a
238 fiscal year shall not revert to the General Fund and shall be available for expenditure in
239 subsequent fiscal years. The payments from the fund shall supplement and not supplant Medicaid
240 payments that would be made to hospitals in the absence of such payments.

241 (c)(1) The secretary shall annually expend money in the fund for payments to qualifying
242 providers or care organizations under contract with the executive office, as further provided in
243 paragraph (2).

244 (2) The secretary shall annually expend amounts from the fund averaging, over a period
245 of 5 years, not less than \$255,000,000 per year; provided, that such payments shall promote the
246 continued implementation of certain federally-approved delivery system reform activities,
247 including to support primary care and complex care management and to address health-related
248 social needs.

249 Section 2VVVVV. (a) There shall be a Communications Access Trust Fund. The fund
250 shall be administered by the secretary of administration and finance, in consultation with the
251 secretary of public safety and security. The fund shall consist of: (i) money transferred to the
252 fund by the general court and specifically designated to be credited to the fund; (ii) funds from
253 public and private sources, including, but not limited to, gifts, grants and donations; and (iii)
254 interest earned on such money. Amounts credited to the fund that are unexpended at the end of a
255 fiscal year shall not revert to the General Fund.

256 (b) Amounts credited to the fund may be expended, without further appropriation, by the
257 secretary of administration and finance for the purposes of making payments to the department
258 of correction, the sheriffs and the department of youth services for providing voice
259 communication services, including phone calls, and other communication services free of charge
260 to the person initiating and the person receiving the communication pursuant to section 27 of
261 chapter 120 and section 87A of chapter 127. The secretary of administration and finance shall
262 make said payments to the department of correction, the sheriffs and the department of youth
263 services on a quarterly basis; provided, that sufficient documentation shall be received by the
264 secretary of administration and finance consistent with subsection (c).

265 (c) The department of correction, the sheriffs and the department of youth services shall
266 submit quarterly to the secretary of administration and finance documentation of communication
267 services provided free of charge in order to receive payments from the fund pursuant to
268 subsection (b); provided, that documentation shall include, but not be limited to, the following
269 information for each facility: (i) the number of phone calls; (ii) the length of each phone call; (iii)
270 other communication services provided; and (iv) the length of each other communication service;
271 and provided further, the secretary of administration and finance may require additional
272 documentation as deemed necessary by the secretary.

273 (d) Quarterly, the secretary of administration and finance, in consultation with the
274 department of correction, the sheriffs and the department of youth services, shall report to the
275 house and senate committees on ways and means and the joint committee on the judiciary on
276 payments from the fund to the department of correction, the sheriffs and the department of youth
277 services, including, but not limited to: (i) amounts expended for communication services by each
278 department; (ii) a breakdown of the cost of each call by minute for each department; (iii) a
279 breakdown of the cost of each other communication service offered by minute for each
280 department; (iv) the number of phone calls, video communications, electronic communications
281 and other communications services at each facility; and (v) any changes in contracts for voice

282 communication services, including any progress in maximizing purchasing power and
283 consolidating contracts between sheriffs, the department of correction and the department of
284 youth services.

285 **SECTION 18.** Section 2TTTTT of said chapter 29, as inserted by section 17, is hereby
286 amended by striking out subsection (c) and inserting in place thereof the following subsection:-

287 (c) [reserved].

288 **SECTION 19.** Section 2UUUUU of said chapter 29, as inserted by section 17, is hereby
289 amended by striking out subsection (c) and inserting in place thereof the following subsection:-

290 (c) [reserved].

291 **SECTION 20.** Section 22C of chapter 32 of the General Laws, as appearing in the 2020
292 Official Edition, is hereby amended by striking out, in lines 13 and 14, the words “the employer
293 contribution to the optional retirement program under section 40 of chapter 15A” and inserting in
294 place thereof the following words:- the administrative costs of the deferred compensation plan
295 operated by the board of higher education authorized by section 18A of chapter 15, and the
296 employer contributions and administrative costs of the optional retirement program authorized
297 by section 40 of chapter 15A.

298 **SECTION 21.** Chapter 33 of the General Laws is hereby amended by striking out section
299 88 and inserting in place thereof the following section:-

300 Section 88. (a) An officer or enlisted person of the Massachusetts organized militia who,
301 while performing any duty lawfully ordered under this chapter without willful neglect on the part
302 of the person, receives injury, is disabled or contracts a sickness or disease that incapacitates the
303 person from pursuing the person’s usual business or occupation shall, during the period of
304 incapacity, receive compensation to be fixed by a board appointed under section 90 to inquire
305 into the claim and the actual and necessary expenses for medical services and care, medicines
306 and hospitalization or replacement or repair of eyeglasses, dentures or prosthetic devices worn or
307 carried and amounts related to lost wages.

308 (b) If the death of a member of the Massachusetts organized militia results from injury,
309 sickness or disease received while in the line of duty pursuant to orders under titles 10 and 32 of
310 the United States Code or this chapter and the injury, sickness or disease resulting in the death
311 was not the result of the decedent’s willful neglect, a single payment of \$200,000 shall be paid to
312 the surviving spouse; provided, however, that if there is no surviving spouse, the amount shall be
313 paid in equal shares to the children of the decedent; provided further, that if there is no surviving
314 spouse and no children, the amount shall be paid in equal shares to the surviving parents of the
315 decedent, and if there are no surviving parents, the amount shall be paid in equal shares to the
316 surviving siblings.

317 (c) For the purposes of subsection (b), parents shall include fathers and mothers through
318 adoption; provided, however, that preference to any claim as the decedent’s parents shall be

319 given to those who exercised a relationship on the date, or most nearly before the date, on which
320 the decedent began their lawful duty as a member of the Massachusetts organized militia.

321 (d) Subsection (b) shall apply to service members whose death occurred on or after April
322 2, 2019 and those who have not received a final decision from the board of compensation as
323 appointed under section 90.

324 (e) All claims presented under this section shall be made in the manner provided in
325 section 90.

326 **SECTION 22.** Section 17 of chapter 37 of the General Laws, as amended by section 19
327 of chapter 24 of the acts of 2021, is hereby further amended by striking out the second paragraph
328 and inserting in place thereof the following paragraph:-

329 The sheriffs of the counties of Barnstable, Bristol, Dukes, Nantucket, Norfolk, Plymouth
330 and Suffolk and of the former counties of Berkshire, Essex, Franklin, Hampden, Hampshire,
331 Middlesex and Worcester shall each receive a salary of \$195,000.

332 **SECTION 23.** Section 1 of chapter 61B of the General Laws, as appearing in the 2020
333 Official Edition, is hereby amended by striking out the second paragraph and inserting in place
334 thereof the following paragraph:-

335 For the purposes of this chapter, the term recreational use shall be limited to the
336 following: hiking, camping, nature study and observation, boating, golfing, non-commercial
337 youth soccer, horseback riding, including commercial horseback riding, equine boarding,
338 hunting, fishing, skiing, swimming, picnicking, running, outdoor education, snowshoeing, ice
339 skating, private non-commercial flying, including hang gliding, archery and target shooting,
340 snowmobile use and off-highway vehicle use.

341 **SECTION 24.** Section 1 of chapter 62 of the General Laws, as so appearing, is hereby
342 amended by striking out, in line 6, the figure “2005” and inserting in place thereof the following
343 figure:- 2022.

344 **SECTION 25.** Paragraph (1) of subsection (d) of section 2 of said chapter 62, as so
345 appearing, is hereby amended by adding the following subparagraph:-

346 (Q) The deduction allowed by section 199A of the Code, as amended and in effect for the
347 current tax year.

348 **SECTION 26.** Chapter 64K of the General Laws is hereby repealed.

349 **SECTION 27.** The ninth paragraph of subsection (ff) of section 89 of chapter 71 of the
350 General Laws, as appearing in the 2020 Official Edition, is hereby amended by striking out the
351 second sentence and inserting in place thereof the following sentence:-

352 In fiscal year 2023 and thereafter, such funding shall be not less than \$1,088 per pupil
353 and shall be adjusted each year by the foundation inflation index, as defined in section 2 of
354 chapter 70.

355 **SECTION 28.** Chapter 118E of the General Laws is hereby amended by striking out
356 section 25A and inserting in place thereof the following section:-

357 Section 25A. (a) For individuals 65 years of age or older, the division shall not consider
358 income in an amount equivalent to 115 per cent of the federal poverty level or assets in an
359 amount equivalent to the federal resource limit for the Medicare Saving programs, each as
360 adjusted annually, in determining eligibility for the Qualified Medicare Beneficiary, Specified
361 Low-Income Medicare Beneficiary and Qualified Individual programs, described in 42 U.S.C.
362 1396a(a)(10)(E) and also known as the Medicare Saving or Medicare Buy-In programs;
363 provided, however, that until the division receives the federal approvals described in subsection
364 (b), the division shall not consider income in the amount equal to 30 per cent of the federal
365 poverty level. Enrollment in the Qualified Individual program shall be capped if the federal
366 allotment for the program is exhausted.

367 (b) Prior to implementing subsection (a), the division shall obtain all required federal
368 approvals, including amending its state plan and amending its section 1115 demonstration
369 waiver, as necessary, and shall promulgate regulations to implement this section.

370 **SECTION 29.** Section 64 of said chapter 118E, as appearing in the 2020 Official
371 Edition, is hereby amended by striking out the definition of “Total acute hospital assessment
372 amount” and inserting in place thereof the following definition:-

373 “Total hospital assessment amount”, a fixed amount equal to \$880,000,000, which is the
374 sum of \$160,000,000 and the amounts transferred, pursuant to section 66, to the Safety Net
375 Provider Trust Fund established in section 2AAAAA of chapter 29, the Hospital Investment and
376 Performance Trust Fund established in section 2TTTTT of said chapter 29, the Population Health
377 Investment Trust Fund established in section 2UUUUU of said chapter 29, and the Non-Acute
378 Care Hospital Reimbursement Trust Fund established in section 2WWWW of said chapter 29,
379 plus 50 per cent of the estimated cost, as determined by the secretary of administration and
380 finance, of administering the health safety net and related assessments in accordance with
381 sections 65 to 69, inclusive.

382 **SECTION 30.** Said section 64 of said chapter 118E is hereby further amended by
383 striking out the definition of “Total hospital assessment amount”, inserted by section 29, and
384 inserting in place thereof the following definition:-

385 “Total acute hospital assessment amount”, an amount equal to \$160,000,000, plus 50 per
386 cent of the estimated cost, as determined by the secretary of administration and finance, of
387 administering the health safety net and related assessments in accordance with sections 65 to 69,
388 inclusive.

389 **SECTION 31.** Section 65 of said chapter 118E, as so appearing, is hereby amended by
390 striking out subsection (b) and inserting in place thereof the following subsection:-

391 (b) The office shall have the following powers and duties: (i) to administer the Health
392 Safety Net Trust Fund, established under section 66, and to require payments to the fund
393 consistent with hospitals' and surcharge payors' liability to the fund, as determined under
394 sections 67 and 68, and any further regulations promulgated by the office; (ii) to set, in
395 consultation with the office of Medicaid, reimbursement rates for payments from the fund to
396 acute hospitals and community health centers for reimbursable health services provided to
397 uninsured and underinsured patients and to disburse monies from the fund consistent with such
398 rates; provided, that the office shall implement a fee-for-service reimbursement system for acute
399 hospitals; (iii) to promulgate regulations further defining: (1) eligibility criteria for reimbursable
400 health services; (2) the scope of health services that are eligible for reimbursement by the Health
401 Safety Net Trust Fund; (3) standards for medical hardship; and (4) standards for reasonable
402 efforts to collect payments for the costs of emergency care; provided, that the office shall verify
403 eligibility using the eligibility system of the office of Medicaid and other appropriate sources to
404 determine the eligibility of uninsured and underinsured patients for reimbursable health services
405 and shall establish other procedures to ensure that payments from the fund are made for health
406 services for which there is no other public or private third party payer, including disallowance of
407 payments to acute hospitals and community health centers for health services provided to
408 individuals if reimbursement is available from other public or private sources; (iv) to develop
409 programs and guidelines to encourage maximum enrollment of uninsured individuals who
410 receive health services reimbursed by the fund into health care plans and programs of health
411 insurance offered by public and private sources and to promote the delivery of care in the most
412 appropriate setting; provided, that the programs and guidelines shall be developed in consultation
413 with the commonwealth health insurance connector, established pursuant to chapter 176Q; and
414 provided further, that these programs shall not deny payments from the fund because services
415 should have been provided in a more appropriate setting if the hospital was required to provide
416 the services under 42 U.S.C. 1395dd; (v) to conduct a utilization review program designed to
417 monitor the appropriateness of services for which payments were made by the fund and to
418 promote the delivery of care in the most appropriate setting; (vi) to administer demonstration
419 programs that reduce Health Safety Net Trust Fund liability to acute hospitals, including a
420 demonstration program to enable disease management for patients with chronic diseases,
421 substance use disorders and psychiatric disorders through enrollment of patients in community
422 health centers and community mental health centers and through coordination between these
423 centers and acute hospitals; provided, that the office shall report the results of these reviews
424 annually to the joint committee on health care financing and the house and senate committees on
425 ways and means; (vii) to enter into agreements or transactions with any federal, state or
426 municipal agency or other public institution or with a private individual, partnership, firm,
427 corporation, association or other entity and to make contracts and execute all instruments
428 necessary or convenient for the carrying on of its business; (viii) to secure payment, without
429 imposing undue hardship upon any individual, for unpaid bills owed to acute hospitals by
430 individuals for health services that are ineligible for reimbursement from the Health Safety Net
431 Trust Fund which have been accounted for as bad debt by the hospital and which are voluntarily
432 referred by a hospital to the department for collection; provided, however, that such unpaid
433 charges shall be considered debts owed to the commonwealth and all payments received shall be

434 credited to the fund; and provided further, that all actions to secure such payments shall be
435 conducted in compliance with a protocol previously submitted by the office to the joint
436 committee on health care financing; (ix) to require hospitals and community health centers to
437 submit to the office data that it reasonably considers necessary; (x) to make, amend and repeal
438 rules and regulations to effectuate the efficient use of monies from the Health Safety Net Trust
439 Fund; provided, however, that the regulations shall be promulgated only after notice and hearing
440 and only upon consultation with the board of the commonwealth health insurance connector,
441 representatives of the Massachusetts Health and Hospital Association, Inc., the Massachusetts
442 Council of Community Hospitals, Inc., the Alliance of Massachusetts Safety Net Hospitals, the
443 Conference of Boston Teaching Hospitals, Inc. and the Massachusetts League of Community
444 Health Centers, Inc.; and (xi) to provide an annual report at the close of each fund fiscal year to
445 the joint committee on health care financing and the house and senate committees on ways and
446 means, evaluating the processes used to determine eligibility for reimbursable health services,
447 including the Virtual Gateway. The report shall include, but not be limited to, the following: (1)
448 an analysis of the effectiveness of these processes in enforcing eligibility requirements for
449 publicly-funded health programs and in enrolling uninsured residents into programs of health
450 insurance offered by public and private sources; (2) an assessment of the impact of these
451 processes on the level of reimbursable health services by providers; and (3) recommendations for
452 ongoing improvements to enhance the performance of eligibility determination systems and
453 reduce hospital administrative costs.

454 **SECTION 32.** Subsection (a) of section 66 of said chapter 118E, as so appearing, is
455 hereby amended by striking out, in lines 14 and 15, the words “and the commonwealth care
456 health insurance program under chapter 118H”.

457 **SECTION 33.** Said section 66 of said chapter 118E, as so appearing, is hereby further
458 amended by striking out subsection (b) and inserting in place thereof the following subsection:-

459 (b) The fund shall consist of: (i) all amounts paid by hospitals and surcharge payors under
460 sections 67 and 68; (ii) all appropriations for the purpose of payments to acute hospitals or
461 community health centers for health services provided to uninsured and underinsured residents;
462 (iii) any transfers from the Commonwealth Care Trust Fund established in section 2000 of
463 chapter 29; (iv) any transfers from the Safety Net Provider Trust Fund established in section
464 2AAAAA of said chapter 29; (v) any transfers from the Hospital Investment and Performance
465 Trust Fund established in section 2TTTTT of said chapter 29; and (vi) all property and securities
466 acquired by and through the use of money belonging to the fund and all interest thereon. There
467 shall also be credited to the fund an amount equal to any federal financial participation claimed
468 and received by the commonwealth for eligible expenditures made from the fund and financed
469 by monies transferred from the Hospital Investment and Performance Trust Fund established in
470 said section 2TTTTT of said chapter 29 or from the Safety Net Provider Trust Fund established
471 in said section 2AAAAA of said chapter 29. To accommodate timing discrepancies between the
472 receipt of such revenue and related expenditures, the comptroller may certify for payment
473 amounts not to exceed the most recent revenue estimates as certified by the secretary of health
474 and human services to be transferred, credited, or deposited under this subsection. Annually, the
475 office shall transfer from the non-federal monies in the fund: (i) \$62,500,000 to the Safety Net
476 Provider Trust Fund established in said section 2AAAAA of said chapter 29; (ii) \$532,000,000

477 to the Hospital Investment and Performance Trust Fund established in said section 2TTTTT of
478 said chapter 29; (iii) \$115,500,000 to the Population Health Investment Trust Fund established in
479 section 2UUUUU of said chapter 29; and (iv) \$10,000,000 to the Non-Acute Care Hospital
480 Reimbursement Trust Fund established in section 2WWWW of said chapter 29. The office shall
481 expend amounts in the fund, except for amounts transferred to the Safety Net Provider Trust
482 Fund, the Hospital Investment and Performance Trust Fund, the Population Health Investment
483 Trust Fund and the Non-Acute Care Hospital Reimbursement Trust Fund, for payments to
484 hospitals and community health centers for reimbursable health services provided to uninsured
485 and underinsured residents, consistent with the requirements of this section, section 69 and the
486 regulations adopted by the office. The office shall also annually expend monies from the fund for
487 the expenses of the executive office, including the health safety net office under subsection (a),
488 for the administration of the health safety net and related assessments. The office shall also
489 expend not more than \$6,000,000 annually from the fund for demonstration projects that use case
490 management and other methods to reduce the liability of the fund to acute hospitals. Any
491 amounts collected from surcharge payors in any year in excess of the total surcharge amount,
492 adjusted to reflect applicable surcharge credits, shall be transferred to the General Fund to
493 support a portion of the costs of the Medicaid program. Any annual balance remaining in the
494 fund after these payments have been made shall be retained in the fund and shall not revert to the
495 General Fund. All interest earned on the amounts in the fund shall be deposited or retained in the
496 fund. The director shall from time to time requisition from the fund amounts that the director
497 considers necessary to meet the current obligations of the office for the purposes of the fund and
498 estimated obligations for a reasonable future period.

499 **SECTION 34.** Said section 66 of said chapter 118E is hereby further amended by
500 striking out subsection (b), inserted by section 33, and inserting in place thereof the following
501 subsection:-

502 (b) The fund shall consist of: (i) all amounts paid by hospitals and surcharge payors under
503 sections 67 and 68; (ii) all appropriations for the purpose of payments to acute hospitals or
504 community health centers for health services provided to uninsured and underinsured residents;
505 (iii) any transfers from the Commonwealth Care Trust Fund established in section 2000 of
506 chapter 29; (iv) any transfers from the Safety Net Provider Trust Fund established in section
507 2AAAAA of chapter 29; (v) any transfers from the Hospital Investment and Performance Trust
508 Fund established in section 2TTTTT of chapter 29; and (vi) all property and securities acquired
509 by and through the use of money belonging to the fund and all interest thereon. There shall also
510 be credited to the fund an amount equal to any federal financial participation claimed and
511 received by the commonwealth for eligible expenditures made from the fund and financed by
512 monies transferred from the Hospital Investment and Performance Trust Fund established in
513 section 2TTTTT of chapter 29 or from the Safety Net Provider Trust Fund established in section
514 2AAAAA of chapter 29. To accommodate timing discrepancies between the receipt of such
515 revenue and related expenditures, the comptroller may certify for payment amounts not to exceed
516 the most recent revenue estimates as certified by the secretary of health and human services to be
517 transferred, credited or deposited under this subsection. Annually, the office shall transfer an
518 amount equal to all amounts paid by privately-owned, nonfederal hospitals under subsection (b)
519 of section 67 to the Non-Acute Care Hospital Reimbursement Trust Fund established in section
520 2WWWW of chapter 29. The office shall expend amounts in the fund, except for amounts

521 transferred to the Non-Acute Care Hospital Reimbursement Trust Fund, for payments to
522 hospitals and community health centers for reimbursable health services provided to uninsured
523 and underinsured residents, consistent with the requirements of this section, section 69 and the
524 regulations adopted by the office. The office shall also annually expend monies from the fund for
525 the expenses of the executive office, including the health safety net office under subsection (a),
526 for the administration of the health safety net and related assessments. The office shall also
527 expend not more than \$6,000,000 annually from the fund for demonstration projects that use case
528 management and other methods to reduce the liability of the fund to acute hospitals. Any
529 amounts collected from surcharge payors in any year in excess of the total surcharge amount,
530 adjusted to reflect applicable surcharge credits, shall be transferred to the General Fund to
531 support a portion of the costs of the Medicaid program. Any annual balance remaining in the
532 fund after these payments have been made shall be retained in the fund and shall not revert to the
533 General Fund. All interest earned on the amounts in the fund shall be deposited or retained in the
534 fund. The director shall from time to time requisition from the fund amounts that the director
535 considers necessary to meet the current obligations of the office for the purposes of the fund and
536 estimated obligations for a reasonable future period.

537 **SECTION 35.** Said chapter 118E is hereby further amended by striking out section 67
538 and inserting in place thereof the following section:-

539 Section 67. (a) Subject to all required federal approvals, including any required waivers
540 under 42 CFR 433.68, a hospital's annual liability to the fund shall be calculated in accordance
541 with this section. The annual aggregate liability of all hospitals to the fund shall equal the total
542 hospital assessment amount.

543 (b) [reserved].

544 (c) The office shall promulgate regulations to establish an appropriate mechanism for
545 enforcing each hospital's liability to the fund in the event that a hospital does not make a
546 scheduled payment to the fund.

547 (d) For the purposes of the assessment described in this section, all hospitals in the
548 commonwealth shall be divided into the following 5 groups:

549 (i) safety net hospitals, defined for the purposes of this section as any hospital identified
550 in the MassHealth demonstration waiver approved under subsection (a) of section 1115 of Title
551 XI of the federal Social Security Act;

552 (ii) academic, teaching and specialty hospitals, defined for the purposes of this section as
553 any academic medical center, teaching hospital or specialty hospital, as determined by the center
554 for health information and analysis as of September 30, 2019, but excluding any safety net
555 hospital;

556 (iii) private acute hospitals, defined for the purposes of this section as any private hospital
557 licensed under section 51 of chapter 111 and which contains a majority of medical-surgical,
558 pediatric, obstetric and maternity beds, as defined by the department of public health, and

559 operating as of September 30, 2019, but excluding any safety net hospital or academic, teaching
560 and specialty hospital;

561 (iv) non-state public hospitals, defined for the purposes of this section as any non-state-
562 owned public hospital in the commonwealth, as determined by the secretary; and

563 (v) non-acute hospitals, defined for the purposes of this section as any nonpublic hospital
564 licensed by the department of public health under section 51 of chapter 111 but not defined as an
565 acute care hospital under section 25B of said chapter 111; or any nonpublic hospital licensed as
566 an inpatient facility by the department of mental health under section 19 of chapter 19 and
567 regulations promulgated thereunder but not categorized as a class VII licensee under the
568 regulations.

569 (e) Each of the 5 groups described in subsection (d) shall be subject to the following
570 assessment rates: (i) safety net hospitals shall be subject to a rate of 16.05430 per cent for
571 inpatient services and 1.19950 per cent for outpatient services; (ii) academic, teaching and
572 specialty hospitals shall be subject to a rate of 4.66730 per cent for inpatient services and
573 0.74400 per cent for outpatient services; (iii) private acute hospitals shall be subject to a rate of
574 8.58690 per cent for inpatient services and 0.89340 per cent for outpatient services; (iv) non-state
575 public hospitals shall be subject to a rate of 1.61490 per cent for inpatient services and 0.55320
576 per cent for outpatient services; and (v) non-acute hospitals shall be subject to a rate of 1.35000
577 per cent for inpatient services and 1.35000 per cent for outpatient services; provided, that the
578 office shall increase each such rate by the amount necessary to generate 50 per cent of the
579 estimated cost, as determined by the secretary of administration and finance, of administering the
580 health safety net and related assessments in accordance with sections 65 to 69, inclusive.

581 (f) The assessment rates described in subsection (e) shall be applied to each hospital's
582 fiscal year 2019 assessed charges for inpatient and outpatient services, as determined by the
583 secretary of health and human services; provided, that the term "assessed charges" shall have the
584 meaning ascribed to it in section 64. The total of the resulting products shall equal a hospital's
585 annual assessment liability.

586 (g) The assessment structure described in this section shall have a term of 5 years
587 commencing October 1, 2022.

588 (h) Subject to receipt of all required federal approvals, the executive office shall
589 implement the assessment structure described in this section and shall promulgate regulations, in
590 consultation with the Massachusetts Health and Hospital Association, Inc., necessary to support
591 implementation of said assessment structure. In promulgating such regulations, and in
592 consultation with the Massachusetts Health and Hospital Association, Inc., the office shall, at
593 minimum: (i) specify an appropriate mechanism for determination and payment of an acute
594 hospital's liability to the fund; (ii) identify the hospitals that belong to each group identified in
595 subsection (d); (iii) specify an appropriate mechanism for the determination of a hospital's
596 liability in cases of merger or transfer of ownership; and (iv) specify an appropriate mechanism
597 by which any amounts paid by a hospital in excess of a hospital's total annual assessment
598 liability may be refunded or otherwise credited to the hospital.

599 **SECTION 36.** Said chapter 118E is hereby further amended by striking out section 67,
600 inserted by section 35, and inserting in place thereof the following section:-

601 Section 67. (a) An acute hospital's liability to the fund shall equal the product of: (i) the
602 ratio of its assessed charges to all acute hospitals' assessed charges; and (ii) the total acute
603 hospital assessment amount. Annually, not later than October 1, the office shall establish each
604 acute hospital's liability to the fund using the best data available as determined by the health
605 safety net office and shall update each acute hospital's liability to the fund as updated
606 information becomes available. The office shall specify by regulation an appropriate mechanism
607 for interim determination and payment of an acute hospital's liability to the fund. An acute
608 hospital's liability to the fund shall, in the case of a transfer of ownership, be assumed by the
609 successor in interest to the acute hospital.

610 (b) There shall be imposed in each fiscal year a uniform assessment upon the assessed
611 charges of all: (i) nonpublic hospitals licensed by the department of public health under section
612 51 of chapter 111 but not defined as acute care hospitals under section 25B of said chapter 111;
613 and (ii) nonpublic hospitals licensed as inpatient facilities by the department of mental health
614 under section 19 of chapter 19 and regulations promulgated thereunder but not categorized as
615 class VII licensees under the regulations; provided, however, that such uniform assessment shall
616 be set as a percentage of the assessed charges of each such hospital and, for each fiscal year, the
617 percentage shall be equal to the ratio of: (1) the total acute hospital assessment amount as defined
618 in section 64 for the same fiscal year; to (2) the total assessed charges as defined in said section
619 64 of acute care hospitals in the same fiscal year and as the amount of those charges is
620 determined by the health safety net office under this section. A non-acute hospital's liability to
621 the fund shall, in the case of a transfer of ownership, be assumed by the successor in interest to
622 the non-acute hospital.

623 (c) The office shall establish by regulation an appropriate mechanism for enforcing each
624 hospital's liability to the fund in the event that a hospital does not make a scheduled payment to
625 the fund.

626 **SECTION 37.** Subsection (b) of section 69 of said chapter 118E, as appearing in the
627 2020 Official Edition, is hereby amended by adding the following sentence:-

628 All reimbursements from the fund financed by any monies transferred from the Safety
629 Net Provider Trust Fund established in section 2AAAAA of chapter 29 or the Hospital
630 Investment and Performance Trust Fund established in section 2TTTTT of said chapter 29 in any
631 fund fiscal year shall be applied to reduce such shortfall unless no shortfall exists in that fund
632 fiscal year.

633 **SECTION 38.** Chapter 120 of the General Laws is hereby amended by adding the
634 following section:-

635 Section 27. (a) The department of youth services shall provide juveniles committed to
636 facilities overseen by the department with voice communication services, including phone calls,

637 free of charge to the person initiating and the person receiving the communication; provided, that
638 voice communication services shall be maximized to the extent possible and nothing in this
639 section shall further limit or restrict access to voice communication services as the services were
640 offered and available at such facilities on July 1, 2022; and provided further, that nothing in this
641 section shall prohibit in-person contact visits.

642 (b) The department of youth services may supplement voice communication services
643 with other communication services, including, but not limited to, video and electronic
644 communication services; provided, however, that other communication services shall not replace
645 voice communication services; and provided further, that other communication services shall be
646 provided free of charge to the person initiating and the person receiving the communication.

647 **SECTION 39.** Chapter 127 of the General Laws is hereby amended by inserting after
648 section 87 the following section:-

649 Section 87A. (a) For the purposes of this section, the terms “state correctional facilities”,
650 “state prisons” and “county correctional facilities” shall have the same meanings as those terms
651 are defined in section 1 of chapter 125.

652 (b) The department of correction and sheriffs shall provide persons committed to state
653 correctional facilities, state prisons and county correctional facilities, including jails and houses
654 of correction, with voice communication services, including phone calls, free of charge to the
655 person initiating and the person receiving the communication; provided, that voice
656 communication services shall be maximized to the extent possible and nothing in this section
657 shall further limit or restrict access to voice communication services as the services were offered
658 and available at such facilities on July 1, 2022; and provided further, that nothing in this section
659 shall prohibit in-person contact visits.

660 (c) The department of correction and sheriffs may supplement voice communication
661 services with other communication services, including, but not limited to, video and electronic
662 communication services; provided, however, that other communication services shall not replace
663 voice communication services; and provided further, that other communication services shall be
664 provided free of charge to the person initiating and the person receiving the communication.

665 **SECTION 40.** Subsection (a) of section 11 of chapter 211D of the General Laws is
666 hereby amended by striking out the figure “\$110”, inserted by section 59 of chapter 24 of the
667 acts of 2021, and inserting in place thereof the following figure:- \$120.

668 **SECTION 41.** Said subsection (a) of said section 11 of said chapter 211D is hereby
669 further amended by striking out the figure “\$75”, inserted by section 60 of said chapter 24, and
670 inserting in place thereof the following figure:- \$85.

671 **SECTION 42.** Said subsection (a) of said section 11 of said chapter 211D is hereby
672 further amended by striking out the figure “\$60”, inserted by section 61 of said chapter 24, and
673 inserting in place thereof the following figure:- \$65.

674 **SECTION 43.** Said subsection (a) of said section 11 of said chapter 211D is hereby
675 further amended by striking out the figure “\$75”, inserted by section 62 of said chapter 24, and
676 inserting in place thereof the following figure:- \$85.

677 **SECTION 44.** Said subsection (a) of said section 11 of said chapter 211D is hereby
678 further amended by striking out the figure “\$60”, inserted by section 63 of said chapter 24, and
679 inserting in place thereof the following figure:- \$65.

680 **SECTION 45.** Section 87A of chapter 276 of the General Laws, as appearing in the 2020
681 Official Edition, is hereby amended by striking out the second to eleventh paragraphs, inclusive.

682 **SECTION 46.** Section 368 of chapter 26 of the acts of 2003 is hereby repealed.

683 **SECTION 47.** Sections 7, 8A and 14 of chapter 115 of the acts of 2016 are hereby
684 repealed.

685 **SECTION 48.** Section 13 of said chapter 115 is hereby amended by striking out the
686 words “Sections 5 and 7” and inserting in place thereof the following words:- Section 5.

687 **SECTION 49.** Sections 54 and 150 of chapter 47 of the acts of 2017 are hereby repealed.

688 **SECTION 50.** Section 58 of chapter 110 of the acts of 2017 is hereby amended by
689 striking out the figure “2023” and inserting in place thereof the following figure:- 2028.

690 **SECTION 51.** (a) The secretary of health and human services, in consultation with the
691 department of higher education, shall establish and implement a public information campaign to
692 promote awareness of the availability of student loan forgiveness and assistance, tuition
693 reimbursement, fellowships or other state and federal programs designed to benefit the health
694 care and behavioral health workforce in the commonwealth and individuals who may be
695 interested in joining the health care or behavioral health workforce. The campaign shall include:
696 (i) educating health care and behavioral health workforce members of the availability of the
697 centralized website, established pursuant to subsection (b), listing available programs; (ii)
698 performing targeted outreach to health care and behavioral health workforce members about the
699 availability of student loan forgiveness and other assistance programs designed to benefit
700 workers; and (iii) performing targeted outreach to the public, including community colleges and
701 other colleges and universities, to provide information about programs available to assist
702 individuals interested in joining the health care and behavioral health workforce.

703 (b) Not later than September 1, 2022, the secretary of health and human services shall
704 establish a centralized website for the public to access a list and description of all programs
705 offered through the commonwealth and any applicable federal programs for loan forgiveness or
706 assistance, tuition reimbursement, fellowships or other workforce-related benefits in the health
707 care and behavioral health industries, including, but not limited to, programs established in: (i)
708 the general laws; (ii) regulations; (iii) the 1115 waiver; (iv) chapter 102 of the acts of 2021; and
709 (v) this act. The website shall provide comprehensive information about all programs offered

710 through the commonwealth for loan forgiveness or assistance, tuition reimbursement,
711 fellowships or other workforce-related benefits for health care and behavioral health workforce
712 members and the public who may be interested in joining the health care or behavioral health
713 workforce, including, but not limited to: (i) eligibility for programs; (ii) information on how to
714 access additional information related to programs; and (iii) website links or other information on
715 how to apply for or request participation in the programs.

716 **SECTION 52.** (a) Notwithstanding subsection (b) of section 3 of chapter 176Q of the
717 General Laws or any other general or special law to the contrary, the commonwealth health
718 insurance connector authority, established pursuant to section 2 of said chapter 176Q, shall
719 implement a 2-year pilot program to extend eligibility for premium assistance payments or point-
720 of-service cost-sharing subsidies for applicants at or below 500 per cent of the federal poverty
721 guidelines.

722 (b) Applicants participating in the pilot program that are between 300 and 500 per cent of
723 the federal poverty guidelines shall have access to a plan that meets at least 90 per cent actuarial
724 value; provided, that the affordability standard for the pilot program shall be consistent with
725 current practices pursuant to said section 3 of said chapter 176Q.

726 (c) Notwithstanding paragraph 2 of section 2000 of chapter 29 of the General Laws or
727 any other general or special law to the contrary, amounts necessary to support the 2-year pilot
728 program established in subsection (a) shall be expended from the Commonwealth Care Trust
729 Fund established in said section 2000 of said chapter 29.

730 (d) The commonwealth health insurance connector authority, in consultation with the
731 center for health information and analysis, shall evaluate the pilot program to assess the public
732 health, health equity, utilization and financial impacts on residents of reducing out-of-pocket
733 costs and premium costs. The center shall collect quantitative and qualitative data at the start of
734 the pilot program and at the end of each year of the pilot program to assess the impact on pilot
735 program participants. Data points to be collected shall include, but not be limited to: (i) rates of
736 unmet medical need due to cost; (ii) disparities in rates of unmet medical need due to cost; (iii)
737 difficulties accessing care at a doctor's office or clinic; (iv) racial and ethnic disparities in
738 difficulties accessing care at a doctor's office or clinic; (v) insurance coverage rates, including
739 rates of continuous insurance coverage; (vi) racial and ethnic disparities in insurance coverage
740 rates; (vii) visits to a doctor's office; and (viii) racial and ethnic disparities in visits to a doctor's
741 office. The connector shall file reports of its evaluation with the clerks of the house of
742 representatives and the senate, the house and senate committees on ways and means, the joint
743 committee on public health and the joint committee on health care financing not later than
744 December 1, 2024 and December 1, 2025.

745 **SECTION 53.** (a) Notwithstanding any general or special law to the contrary, no voice
746 communication services contract in force on the effective date of this act shall be affected by
747 sections 38 and 39; provided, that voice communication services shall be free of charge to the
748 person initiating and the person receiving the communication on July 1, 2022; provided further,
749 that other communication services offered pursuant to sections 38 and 39, including, but not

750 limited to, video and electronic communication services shall be offered free of charge to the
751 person initiating and the person receiving the communication on July 1, 2022.

752 (b) Notwithstanding any general or special law to the contrary, upon the expiration of any
753 contract for voice communication services the department of corrections, the sheriffs and the
754 department of youth services shall seek to maximize purchasing power and consolidate contracts
755 to the extent feasible; provided, that not later than January 1, 2023, the department of correction,
756 the sheriffs and the department of youth services shall report to the house and senate committees
757 on ways and means and the joint committee on the judiciary on the status of any communication
758 services contracts and plans to consolidate contracts to maximize purchasing power for voice
759 communication services.

760 **SECTION 54.** Notwithstanding any general or special law to the contrary, the health
761 policy commission shall conduct an analysis and issue a report on the ongoing effects of the
762 COVID-19 pandemic on behavioral health-related boarding in emergency departments in the
763 commonwealth. The study shall consider emergency department visits in the commonwealth
764 classified as mental health, behavioral health, substance use disorder or other alcohol-related
765 diagnosis and shall review: (i) length of wait for boarding; (ii) primary reason for wait; (iii) level
766 of care required; (iv) type of insurance coverage; (v) available data on patient age, race,
767 ethnicity, preferred spoken language, gender and homelessness; (vi) the ability to facilitate care
768 coordination among health care providers; (vii) effects of COVID-19 on wait times; (viii) effects
769 of COVID-19 on workforce and any workforce shortages; and (ix) other factors related to
770 COVID-19 affecting the: (a) increased burden on emergency departments as a result of
771 behavioral health-related boarding; and (b) outcomes and quality of care for patients boarded in
772 emergency departments. The health policy commission shall also review behavioral health-
773 related boarding in other states and actions taken and any best practices to address the pressure
774 on emergency departments as a result of the effects of the COVID-19 pandemic on behavioral
775 health-related boarding. Not later than July 1, 2023, the health policy commission shall submit to
776 the clerks of the house of representatives and the senate, the house and senate committees on
777 ways and means, the joint committee on mental health, substance use and recovery and the joint
778 committee on healthcare financing the report, including recommendations on how to address: (i)
779 the burden on emergency departments; (ii) outcomes for patients with behavioral diagnoses; and
780 (iii) quality of care for patients boarded in emergency departments.

781 **SECTION 55.** Notwithstanding any general or special law to the contrary, the secretary
782 of health and human services shall seek any and all required federal approvals the secretary
783 deems necessary to implement: (1) the Hospital Investment and Performance Trust Fund
784 established in section 17; (2) the Population Health Investment Trust Fund established in section
785 17; and (3) sections 12, 15, 29, 33, 35, 37, 47, 48, 49 and 70, including any required waivers
786 under 42 CFR 433.68 necessary to implement the updates to the hospital assessment described in
787 section 67 of chapter 118E of the General Laws, as amended by section 35.

788 If, after having received any required federal approval necessary to implement the
789 Hospital Investment and Performance Trust Fund established in section 17, the Population
790 Health Investment Trust Fund established in section 17 and sections 12, 15, 29, 33, 35, 37, 47,
791 48, 49 and 70, such approval is withdrawn or is otherwise not in effect, or the secretary
792 determines that a change in federal law, regulations or the federal government's administration

793 of federal law or regulation requires a modification to the hospital assessment described in
794 section 67 of chapter 118E of the General Laws, as amended by section 35, or to the
795 implementation of the Health Safety Net Trust Fund established in section 66 of said chapter
796 118E, as amended by sections 32 and 33, the Non-Acute Care Hospital Reimbursement Trust
797 Fund established in section 2WWW of chapter 29 of the General Laws, as amended by section
798 12, the Safety Net Provider Trust Fund established in section 2AAAAA of said chapter 29, as
799 amended by section 15, the Hospital Investment and Performance Trust Fund established in
800 section 17, or the Population Health Investment Trust Fund established in section 17, the
801 secretary shall notify the joint committee on health care financing and the house and senate
802 committees on ways and means and shall consult with the Massachusetts Health and Hospital
803 Association, Inc. to develop alternatives.

804 Not later than December 15, 2023, and annually thereafter, the secretary shall report to
805 the joint committee on health care financing and the house and senate committees on ways and
806 means: (i) the amount of the assessment made and collected from each hospital pursuant to
807 section 35; and (ii) the amounts transferred to, deposited in, expended from and transferred from
808 the Hospital Investment and Performance Trust Fund established in section 17 and the
809 Population Health Investment Trust Fund established in section 17.

810 **SECTION 56.** Notwithstanding any general or special law to the contrary, in the event
811 that the commonwealth does not receive all federal approvals pursuant to section 55 the secretary
812 of health and human services determines necessary to implement: (1) the Hospital Investment
813 and Performance Trust Fund established in section 17; (2) the Population Health Investment
814 Trust Fund established in section 17; and (3) sections 12, 15, 29, 33, 35, 37, 47, 48, 49 and 70,
815 including any required waivers under 42 CFR 433.68, the hospital assessment described in
816 sections 64 through 69, inclusive, of chapter 118E of the General Laws shall remain in effect as
817 if sections 12, 15, 29, 33, 35, 37, 47, 48, 49, 70, the Hospital Investment and Performance Trust
818 Fund established in section 17 and the Population Health Investment Trust Fund established in
819 section 17 and had not been enacted until the first full calendar month following the calendar
820 month in which the secretary determines all such federal approvals have been received. The
821 secretary, in consultation with representatives of the Massachusetts Health and Hospital
822 Association, Inc., shall continue to seek all federal approvals necessary to implement the
823 Hospital Investment and Performance Trust Fund established in section 17, the Population
824 Health Investment Trust Fund established in section 17 and sections 12, 15, 29, 31, 32, 33, 35,
825 37, 47, 48, 49 and 70 until such federal approvals are received or the United States Department
826 of Health and Human Services or the federal Centers for Medicare and Medicaid Services render
827 a final determination that an assessment established pursuant to sections 65 through 69,
828 inclusive, of said chapter 118E cannot be implemented.

829 **SECTION 57.** (a) Notwithstanding any general or special law to the contrary, the
830 unexpended balances in items 0699-0015 and 0699-9100 of section 2 shall be deposited into the
831 State Retiree Benefits Trust Fund established in section 24 of chapter 32A of the General Laws
832 before the certification of the fiscal year 2023 consolidated net surplus under section 5C of
833 chapter 29 of the General Laws. The amount deposited shall be an amount equal to 10 per cent of
834 all payments received by the commonwealth in fiscal year 2023 under the master settlement
835 agreement in Commonwealth of Massachusetts v. Philip Morris, Inc. et al., Middlesex Superior

836 Court, No. 95-7378; provided, however, that if in fiscal year 2023 the unexpended balances of
837 said items 0699-0015 and 0699-9100 of said section 2 are less than 10 per cent of all payments
838 received by the commonwealth in fiscal year 2023 under the master settlement agreement
839 payments, an amount equal to the difference shall be transferred to the State Retiree Benefits
840 Trust Fund from payments received by the commonwealth under the master settlement
841 agreement.

842 (b) Notwithstanding any general or special law to the contrary, the payment percentage
843 set forth in section 152 of chapter 68 of the acts of 2011 shall not apply in fiscal year 2023.

844 **SECTION 58.** Notwithstanding any special or general law to the contrary, for fiscal year
845 2023, \$94,000,000 of the amount transferred in item 1595-6370 of section 2E shall be considered
846 operating assistance and distributed to regional transit authorities; provided, however, that for
847 fiscal year 2023, \$90,500,000 shall be distributed based on fiscal year 2022 distributions, in
848 accordance with the updated fiscal year 2022 bilateral memorandum of understanding between
849 each regional transit authority and the Massachusetts Department of Transportation; provided
850 further, that each regional transit authority shall receive operating assistance from said item
851 1595-6370 of said section 2E of not less than the amount received in fiscal year 2022; and
852 provided further, that \$3,500,000 shall be distributed to each regional transit authority based on
853 the following formula: 60 per cent based on total transit ridership as reported on the most recent
854 certified national transit data base report, 30 per cent based on population of its member
855 communities from the most recent census and 10 per cent based on service coverage area
856 determined by the total square miles of its member communities. The department may require
857 each regional transit authority to provide data on ridership, customer service and satisfaction,
858 asset management and financial performance, including farebox recovery, and shall compile
859 collected data into a report on the performance of regional transit authorities and each authority's
860 progress towards meeting the performance metrics established in each memorandum of
861 understanding.

862 **SECTION 59.** Notwithstanding any general or special law to the contrary, the amounts
863 transferred pursuant to subdivision (1) of section 22C of chapter 32 of the General Laws shall be
864 made available for the Commonwealth's Pension Liability Fund established in section 22 of said
865 chapter 32. The amounts transferred pursuant to said subdivision (1) of said section 22C of said
866 chapter 32 shall meet the commonwealth's obligations pursuant to said section 22C of said
867 chapter 32, including retirement benefits payable by the state employees' retirement system and
868 the state teachers' retirement system, for the costs associated with a 3 per cent cost-of-living
869 adjustment pursuant to section 102 of said chapter 32, for the reimbursement of local retirement
870 systems for previously authorized cost-of-living adjustments pursuant to said section 102 of said
871 chapter 32 and for the costs of increased survivor benefits pursuant to chapter 389 of the acts of
872 1984. The state board of retirement and each city, town, county and district shall verify these
873 costs, subject to rules that shall be adopted by the state treasurer. The state treasurer may make
874 payments upon a transfer of funds to reimburse certain cities and towns for pensions of retired
875 teachers, including any other obligation that the commonwealth has assumed on behalf of a
876 retirement system other than the state employees' retirement system or state teachers' retirement
877 system, including the commonwealth's share of the amounts to be transferred pursuant to section
878 22B of said chapter 32. The payments under this section shall be made only pursuant to

879 distribution of money from the Commonwealth's Pension Liability Fund and any distribution,
880 and the payments for which distributions are required, shall be detailed in a written report
881 prepared quarterly by the secretary of administration and finance and submitted to the house and
882 senate committees on ways and means and the joint committee on public service in advance of
883 the distribution. Distributions shall not be made in advance of the date on which a payment is
884 actually to be made. If the amount transferred pursuant to subdivision (1) of section 22C of said
885 chapter 32 exceeds the amount necessary to adequately fund the annual pension obligations, the
886 excess amount shall be credited to the Pension Reserves Investment Trust Fund established in
887 subdivision (8) of said section 22 of said chapter 32 to reduce the unfunded pension liability of
888 the commonwealth.

889 **SECTION 60.** Notwithstanding any general or special law to the contrary, the secretary
890 of administration and finance, in consultation with the secretary of health and human services,
891 may transfer not more than a total of \$17,000,000 from the prescription advantage program in
892 item 9110-1455 of section 2 and the Health Safety Net Trust Fund established in section 66 of
893 chapter 118E of the General Laws in fiscal year 2023 to support the Medicare Saving or
894 Medicare Buy-In programs established in section 25A of said chapter 118E; provided, however,
895 that the secretary of health and human services shall certify to the house and senate committees
896 on ways and means, not less than 45 days in advance of the transfer, in writing, the amount to be
897 transferred and an explanation of the amount of expected savings to those programs resulting
898 from the transfer.

899 **SECTION 61.** Notwithstanding any general or special law to the contrary, payments
900 from the Health Safety Net Trust Fund established in section 66 of chapter 118E of the General
901 Laws may be made either as safety net care payments under the commonwealth's waiver
902 pursuant to section 1115 of the federal Social Security Act, 42 U.S.C. 1315, or as an adjustment
903 to service rate payments under Title XIX and XXI of the Social Security Act or a combination of
904 both. Other federally permissible funding mechanisms available for certain hospitals, as defined
905 by regulations of the executive office of health and human services, may be used to reimburse up
906 to \$70,000,000 of uncompensated care pursuant to sections 66 and 69 of said chapter 118E using
907 sources distinct from the funding made available to the Health Safety Net Trust Fund.

908 **SECTION 62.** Notwithstanding any general or special law to the contrary, not later than
909 October 1, 2022 and without further appropriation, the comptroller shall transfer from the
910 General Fund to the Health Safety Net Trust Fund established in section 66 of chapter 118E of
911 the General Laws the greater of \$45,000,000 or 1/12 of the total expenditures to hospitals and
912 community health centers required pursuant to this act, for the purposes of making initial gross
913 payments to qualifying acute care hospitals for the hospital fiscal year beginning October 1,
914 2022. These payments shall be made to hospitals before, and in anticipation of, the payment by
915 hospitals of their gross liability to the Health Safety Net Trust Fund. Not later than June 30,
916 2023, the comptroller shall transfer from the Health Safety Net Trust Fund to the General Fund,
917 the amount of the transfer authorized by this section and any allocation of that amount as
918 certified by the director of the health safety net office.

919 **SECTION 63.** Notwithstanding any general or special law to the contrary, in hospital
920 fiscal year 2023, the office of the inspector general may expend up to \$1,000,000 from the

921 Health Safety Net Trust Fund established in section 66 of chapter 118E of the General Laws for
922 costs associated with maintaining a health safety net audit unit within the office. The unit shall
923 continue to oversee and examine the practices in hospitals, including, but not limited to, the care
924 of the uninsured and the resulting free charges. The unit shall also study and review the Medicaid
925 program under said chapter 118E, including, but not limited to, a review of the program's
926 eligibility requirements, utilization, claims administration and compliance with federal mandates.
927 The inspector general shall submit a report to the chairs of the house and senate committees on
928 ways and means on the results of the audits and any other completed analyses not later than
929 March 1, 2023.

930 **SECTION 64.** Notwithstanding any general or special law to the contrary, the secretary
931 of health and human services shall, not later than June 30, 2023, make available \$40,000,000
932 from the MassHealth Delivery System Reform Trust Fund established in section 2SSSS of
933 chapter 29 of the General Laws to the comptroller for deposit in the General Fund to reimburse
934 the commonwealth for Medicaid-related expenses incurred in fiscal year 2023 as certified by the
935 secretary of health and human services.

936 **SECTION 65.** Notwithstanding any general or special law to the contrary, the
937 comptroller, at the direction of the secretary of administration and finance, may transfer up to
938 \$15,000,000 from the Commonwealth Care Trust Fund established in section 2000 of chapter
939 29 of the General Laws to the Health Safety Net Trust Fund established in section 66 of chapter
940 118E of the General Laws.

941 **SECTION 66.** Notwithstanding any general or special law to the contrary, during fiscal
942 year 2023, to the extent funds are available and prior to the calculation of the fiscal year 2023
943 consolidated net surplus in accordance with section 5C of chapter 29 of the General Laws, the
944 comptroller shall transfer \$819,740,779 to the Commonwealth Stabilization Fund established in
945 section 2H of chapter 29 of the General Laws, in the manner described in section 5G of said
946 chapter 29.

947 **SECTION 67.** Notwithstanding any general or special law to the contrary, any
948 unexpended balances, not exceeding a total of \$25,703,629, in item 7061-0011 of section 2 of
949 chapter 24 of the acts of 2021 shall not revert to the General Fund until June 30, 2023 and may
950 be expended by the department of elementary and secondary education to provide grants to K-12
951 schools for workforce supports for teachers and staff including, but not limited to, certification
952 cost reimbursement, professional development and bonuses.

953 **SECTION 68.** Section 52 is hereby repealed.

954 **SECTION 69.** Section 55 is hereby repealed.

955 **SECTION 70.** Sections 11, 12, 15, the Hospital Investment and Performance Trust Fund
956 established in section 17 and the Population Health Investment Trust Fund established in section
957 17 and sections 29, 33, 35, 37 shall take effect on October 1, 2022.

958 **SECTION 71.** Sections 16, 18, 19, 30, 34, 36 and 69 shall take effect on October 1,
959 2027.

960 **SECTION 72.** Sections 24 and 25 shall take effect for taxable years beginning on or after
961 January 1, 2022.

962 **SECTION 73.** Section 52 shall take effect on June 1, 2023.

963 **SECTION 74.** Section 68 shall take effect on May 31, 2025.

964 **SECTION 75.** Except as otherwise specified, this act shall take effect on July 1, 2022.